

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

**In the Matter of the First Amended
Accusation Against:**

Arman Ossia, M.D.

**Physician's and Surgeon's
Certificate No. A 104763**

Case No.: 800-2019-055817

Respondent.

DECISION

The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on March 23, 2023.

IT IS SO ORDERED: February 21, 2023.

MEDICAL BOARD OF CALIFORNIA



**Richard E. Thorp, M.D., Chair
Panel B**

1 ROB BONTA
Attorney General of California
2 JUDITH T. ALVARADO
Supervising Deputy Attorney General
3 LATRICE R. HEMPHILL
Deputy Attorney General
4 State Bar No. 285973
300 So. Spring Street, Suite 1702
5 Los Angeles, CA 90013
Telephone: (213) 269-6198
6 Facsimile: (916) 731-2117
Attorneys for Complainant
7

8 **BEFORE THE**
9 **MEDICAL BOARD OF CALIFORNIA**
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12 In the Matter of the First Amended Accusation
Against:

13 **ARMAN OSSIA, M.D.**
14 **421 East Angeleno Avenue, #102**
15 **Burbank CA 91501**

16 **Physician's and Surgeon's Certificate No. A**
17 **104763,**

18 Respondent.

Case No. 800-2019-055817

OAH No. 2022060537

STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER

19 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-
20 entitled proceedings that the following matters are true:

21 **PARTIES**

22 1. Reji Varghese (Complainant) is the Deputy Director of the Medical Board of
23 California (Board). He brought this action solely in his official capacity and is represented in this
24 matter by Rob Bonta, Attorney General of the State of California, by Latrice R. Hemphill, Deputy
25 Attorney General.

26 2. Respondent Arman Ossia, M.D. (Respondent) is represented in this proceeding by
27 attorney Gary Wittenberg, Esq., whose address is: 1901 Avenue of the Stars, Suite 1750
28 Los Angeles, CA 90067.

1 3. On or about July 2, 2008, the Board issued Physician's and Surgeon's Certificate No.
2 A 104763 to Arman Ossia, M.D. The Physician's and Surgeon's Certificate was in full force and
3 effect at all times relevant to the charges brought in First Amended Accusation No. 800-2019-
4 055817, and will expire on April 30, 2024, unless renewed.

5 **JURISDICTION**

6 4. First Amended Accusation No. 800-2019-055817 was filed before the Board, and is
7 currently pending against Respondent. The First Amended Accusation and all other statutorily
8 required documents were properly served on Respondent on July 5, 2022. Respondent timely
9 filed his Notice of Defense contesting the First Amended Accusation.

10 5. A copy of First Amended Accusation No. 800-2019-055817 is attached as exhibit A
11 and incorporated herein by reference.

12 **ADVISEMENT AND WAIVERS**

13 6. Respondent has carefully read, fully discussed with counsel, and understands the
14 charges and allegations in First Amended Accusation No. 800-2019-055817. Respondent has
15 also carefully read, fully discussed with his counsel, and understands the effects of this Stipulated
16 Settlement and Disciplinary Order.

17 7. Respondent is fully aware of his legal rights in this matter, including the right to a
18 hearing on the charges and allegations in the First Amended Accusation; the right to confront and
19 cross-examine the witnesses against him; the right to present evidence and to testify on his own
20 behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the
21 production of documents; the right to reconsideration and court review of an adverse decision;
22 and all other rights accorded by the California Administrative Procedure Act and other applicable
23 laws.

24 8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and
25 every right set forth above.

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28 ///

1 CULPABILITY

2 9. Respondent understands and agrees that the charges and allegations in First Amended
3 Accusation No. 800-2019-055817, if proven at a hearing, constitute cause for imposing discipline
4 upon his Physician's and Surgeon's Certificate.

5 10. Respondent does not contest that, at an administrative hearing, complainant could
6 establish a prima facie case with respect to the charges and allegations in First Amended
7 Accusation No. 800-2019-055817, a true and correct copy of which is attached hereto as Exhibit
8 A, and that he has thereby subjected his Physician's and Surgeon's Certificate, No. A 104763 to
9 disciplinary action.

10 11. Respondent agrees that his Physician's and Surgeon's Certificate is subject to
11 discipline and he agrees to be bound by the Board's probationary terms as set forth in the
12 Disciplinary Order below.

13 CONTINGENCY

14 12. This stipulation shall be subject to approval by the Medical Board of California.
15 Respondent understands and agrees that counsel for Complainant and the staff of the Medical
16 Board of California may communicate directly with the Board regarding this stipulation and
17 settlement, without notice to or participation by Respondent or his counsel. By signing the
18 stipulation, Respondent understands and agrees that he may not withdraw his agreement or seek
19 to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails
20 to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary
21 Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal
22 action between the parties, and the Board shall not be disqualified from further action by having
23 considered this matter.

24 13. Respondent agrees that if he ever petitions for early termination or modification of
25 probation, or if an accusation and/or petition to revoke probation is filed against him before the
26 Board, all of the charges and allegations contained in First Amended Accusation No. 800-2019-
27 055817 shall be deemed true, correct and fully admitted by respondent for purposes of any such
28 proceeding or any other licensing proceeding involving Respondent in the State of California.

14. The parties understand and agree that Portable Document Format (PDF) and facsimile copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile signatures thereto, shall have the same force and effect as the originals.

15. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or opportunity to be heard by the Respondent, issue and enter the following Disciplinary Order:

DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 104763 issued to Respondent ARMAN OSSIA, M.D. is revoked. However, the revocation is stayed and Respondent is placed on probation for four (4) years on the following terms and conditions:

1. CONTROLLED SUBSTANCES - MAINTAIN RECORDS AND ACCESS TO RECORDS AND INVENTORIES. Respondent shall maintain a record of all controlled substances ordered, prescribed, dispensed, administered, or possessed by Respondent, and any recommendation or approval which enables a patient or patient's primary caregiver to possess or cultivate marijuana for the personal medical purposes of the patient within the meaning of Health and Safety Code section 11362.5, during probation, showing all of the following: 1) the name and address of the patient; 2) the date; 3) the character and quantity of controlled substances involved; and 4) the indications and diagnosis for which the controlled substances were furnished.

Respondent shall keep these records in a separate file or ledger, in chronological order. All records and any inventories of controlled substances shall be available for immediate inspection and copying on the premises by the Board or its designee at all times during business hours and shall be retained for the entire term of probation.

2. CONTROLLED SUBSTANCES - ABSTAIN FROM USE. Respondent shall abstain completely from the personal use or possession of controlled substances as defined in the California Uniform Controlled Substances Act, dangerous drugs as defined by Business and Professions Code section 4022, and any drugs requiring a prescription. This prohibition does not apply to medications lawfully prescribed to Respondent by another practitioner for a bona fide illness or condition.

1 Within 15 calendar days of receiving any lawfully prescribed medications, Respondent
2 shall notify the Board or its designee of the: issuing practitioner's name, address, and telephone
3 number; medication name, strength, and quantity; and issuing pharmacy name, address, and
4 telephone number.

5 If Respondent has a confirmed positive biological fluid test for any substance (whether or
6 not legally prescribed) and has not reported the use to the Board or its designee, Respondent
7 shall receive a notification from the Board or its designee to immediately cease the practice of
8 medicine. The Respondent shall not resume the practice of medicine until the final decision on an
9 accusation and/or a petition to revoke probation is effective. An accusation and/or petition to
10 revoke probation shall be filed by the Board within 30 days of the notification to cease practice.
11 If the Respondent requests a hearing on the accusation and/or petition to revoke probation, the
12 Board shall provide the Respondent with a hearing within 30 days of the request, unless the
13 Respondent stipulates to a later hearing. If the case is heard by an Administrative Law Judge
14 alone, he or she shall forward a Proposed Decision to the Board within 15 days of submission of
15 the matter. Within 15 days of receipt by the Board of the Administrative Law Judge's proposed
16 decision, the Board shall issue its Decision, unless good cause can be shown for the delay. If the
17 case is heard by the Board, the Board shall issue its decision within 15 days of submission of the
18 case, unless good cause can be shown for the delay. Good cause includes, but is not limited to,
19 non-adoption of the proposed decision, requests for reconsideration, remands and other
20 interlocutory orders issued by the Board. The cessation of practice shall not apply to the
21 reduction of the probationary time period.

22 If the Board does not file an accusation or petition to revoke probation within 30 days of the
23 issuance of the notification to cease practice or does not provide Respondent with a hearing
24 within 30 days of a such a request, the notification of cease practice shall be dissolved.

25 3. ALCOHOL - ABSTAIN FROM USE. Respondent shall abstain completely from the
26 use of products or beverages containing alcohol.

27 If Respondent has a confirmed positive biological fluid test for alcohol, Respondent shall
28 receive a notification from the Board or its designee to immediately cease the practice of

1 medicine. The Respondent shall not resume the practice of medicine until the final decision on an
2 accusation and/or a petition to revoke probation is effective. An accusation and/or petition to
3 revoke probation shall be filed by the Board within 30 days of the notification to cease practice.
4 If the Respondent requests a hearing on the accusation and/or petition to revoke probation, the
5 Board shall provide the Respondent with a hearing within 30 days of the request, unless the
6 Respondent stipulates to a later hearing. If the case is heard by an Administrative Law Judge
7 alone, he or she shall forward a Proposed Decision to the Board within 15 days of submission of
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9 decision, the Board shall issue its Decision, unless good cause can be shown for the delay. If the
10 case is heard by the Board, the Board shall issue its decision within 15 days of submission of the
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12 non-adoption of the proposed decision, requests for reconsideration, remands and other
13 interlocutory orders issued by the Board. The cessation of practice shall not apply to the
14 reduction of the probationary time period.

15 If the Board does not file an accusation or petition to revoke probation within 30 days of the
16 issuance of the notification to cease practice or does not provide Respondent with a hearing
17 within 30 days of such a request, the notification of cease practice shall be dissolved.

18 4. BIOLOGICAL FLUID TESTING. Respondent shall immediately submit to
19 biological fluid testing, at Respondent's expense, upon request of the Board or its designee.
20 "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair
21 follicle testing, or similar drug screening approved by the Board or its designee. Prior to
22 practicing medicine, Respondent shall contract with a laboratory or service approved in advance
23 by the Board or its designee that will conduct random, unannounced, observed, biological fluid
24 testing. The contract shall require results of the tests to be transmitted by the laboratory or
25 service directly to the Board or its designee within four hours of the results becoming available.
26 Respondent shall maintain this laboratory or service contract during the period of probation.

27 A certified copy of any laboratory test result may be received in evidence in any
28 proceedings between the Board and Respondent.

1 If Respondent fails to cooperate in a random biological fluid testing program within the
2 specified time frame, Respondent shall receive a notification from the Board or its designee to
3 immediately cease the practice of medicine. The Respondent shall not resume the practice of
4 medicine until the final decision on an accusation and/or a petition to revoke probation is
5 effective. An accusation and/or petition to revoke probation shall be filed by the Board within 30
6 days of the notification to cease practice. If the Respondent requests a hearing on the accusation
7 and/or petition to revoke probation, the Board shall provide the Respondent with a hearing within
8 30 days of the request, unless the Respondent stipulates to a later hearing. If the case is heard by
9 an Administrative Law Judge alone, he or she shall forward a Proposed Decision to the Board
10 within 15 days of submission of the matter. Within 15 days of receipt by the Board of the
11 Administrative Law Judge's proposed decision, the Board shall issue its Decision, unless good
12 cause can be shown for the delay. If the case is heard by the Board, the Board shall issue its
13 decision within 15 days of submission of the case, unless good cause can be shown for the delay.
14 Good cause includes, but is not limited to, non-adoption of the proposed decision, requests for
15 reconsideration, remands and other interlocutory orders issued by the Board. The cessation of
16 practice shall not apply to the reduction of the probationary time period.

17 If the Board does not file an accusation or petition to revoke probation within 15 days of the
18 issuance of the notification to cease practice or does not provide Respondent with a hearing
19 within 30 days of such a request, the notification of cease practice shall be dissolved.

20 5. PRESCRIBING PRACTICES COURSE. Within 60 calendar days of the effective
21 date of this Decision, Respondent shall enroll in a course in prescribing practices approved in
22 advance by the Board or its designee. Respondent shall provide the approved course provider
23 with any information and documents that the approved course provider may deem pertinent.
24 Respondent shall participate in and successfully complete the classroom component of the course
25 not later than six (6) months after Respondent's initial enrollment. Respondent shall successfully
26 complete any other component of the course within one (1) year of enrollment. The prescribing
27 practices course shall be at Respondent's expense and shall be in addition to the Continuing
28 Medical Education (CME) requirements for renewal of licensure.

1 A prescribing practices course taken after the acts that gave rise to the charges in the
2 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
3 or its designee, be accepted towards the fulfillment of this condition if the course would have
4 been approved by the Board or its designee had the course been taken after the effective date of
5 this Decision.

6 Respondent shall submit a certification of successful completion to the Board or its
7 designee not later than 15 calendar days after successfully completing the course, or not later than
8 15 calendar days after the effective date of the Decision, whichever is later.

9 6. MEDICAL RECORD KEEPING COURSE. Within 60 calendar days of the effective
10 date of this Decision, Respondent shall enroll in a course in medical record keeping approved in
11 advance by the Board or its designee. Respondent shall provide the approved course provider
12 with any information and documents that the approved course provider may deem pertinent.
13 Respondent shall participate in and successfully complete the classroom component of the course
14 not later than six (6) months after Respondent's initial enrollment. Respondent shall successfully
15 complete any other component of the course within one (1) year of enrollment. The medical
16 record keeping course shall be at Respondent's expense and shall be in addition to the Continuing
17 Medical Education (CME) requirements for renewal of licensure.

18 A medical record keeping course taken after the acts that gave rise to the charges in the
19 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
20 or its designee, be accepted towards the fulfillment of this condition if the course would have
21 been approved by the Board or its designee had the course been taken after the effective date of
22 this Decision.

23 Respondent shall submit a certification of successful completion to the Board or its
24 designee not later than 15 calendar days after successfully completing the course, or not later than
25 15 calendar days after the effective date of the Decision, whichever is later.

26 7. PROFESSIONALISM PROGRAM (ETHICS COURSE). Within 60 calendar days of
27 the effective date of this Decision, Respondent shall enroll in a professionalism program, that
28 meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.1.

Respondent shall participate in and successfully complete that program. Respondent shall provide any information and documents that the program may deem pertinent. Respondent shall successfully complete the classroom component of the program not later than six (6) months after Respondent's initial enrollment, and the longitudinal component of the program not later than the time specified by the program, but no later than one (1) year after attending the classroom component. The professionalism program shall be at Respondent's expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

A professionalism program taken after the acts that gave rise to the charges in the Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board or its designee, be accepted towards the fulfillment of this condition if the program would have been approved by the Board or its designee had the program been taken after the effective date of this Decision.

Respondent shall submit a certification of successful completion to the Board or its designee not later than 15 calendar days after successfully completing the program or not later than 15 calendar days after the effective date of the Decision, whichever is later.

8. PSYCHOTHERAPY. Within 60 calendar days of the effective date of this Decision, Respondent shall submit to the Board or its designee for prior approval the name and qualifications of a California-licensed board certified psychiatrist or a licensed psychologist who has a doctoral degree in psychology and at least five years of postgraduate experience in the diagnosis and treatment of emotional and mental disorders. Upon approval, Respondent shall undergo and continue psychotherapy treatment, including any modifications to the frequency of psychotherapy, until the Board or its designee deems that no further psychotherapy is necessary.

The psychotherapist shall consider any information provided by the Board or its designee and any other information the psychotherapist deems relevant and shall furnish a written evaluation report to the Board or its designee. Respondent shall cooperate in providing the psychotherapist with any information and documents that the psychotherapist may deem pertinent.

Respondent shall have the treating psychotherapist submit quarterly status reports to the

1 Board or its designee. The Board or its designee may require Respondent to undergo psychiatric
2 evaluations by a Board-appointed board certified psychiatrist. If, prior to the completion of
3 probation, Respondent is found to be mentally unfit to resume the practice of medicine without
4 restrictions, the Board shall retain continuing jurisdiction over Respondent's license and the
5 period of probation shall be extended until the Board determines that Respondent is mentally fit
6 to resume the practice of medicine without restrictions.

7 Respondent shall pay the cost of all psychotherapy and psychiatric evaluations.

8 9. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the
9 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the
10 Chief Executive Officer at every hospital where privileges or membership are extended to
11 Respondent, at any other facility where Respondent engages in the practice of medicine,
12 including all physician and locum tenens registries or other similar agencies, and to the Chief
13 Executive Officer at every insurance carrier which extends malpractice insurance coverage to
14 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15
15 calendar days.

16 This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

17 10. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE
18 NURSES. During probation, Respondent is prohibited from supervising physician assistants and
19 advanced practice nurses.

20 11. OBEY ALL LAWS. Respondent shall obey all federal, state and local laws, all rules
21 governing the practice of medicine in California and remain in full compliance with any court
22 ordered criminal probation, payments, and other orders.

23 12. INVESTIGATION/ENFORCEMENT COST RECOVERY. Respondent is hereby
24 ordered to reimburse the Board its costs of investigation and enforcement, in the amount of
25 \$22,955.00 (twenty-two thousand nine hundred fifty-five dollars). Costs shall be payable to the
26 Medical Board of California. Failure to pay such costs shall be considered a violation of
27 probation.

28 Payment must be made in full within 30 calendar days of the effective date of the Order, or

1 by a payment plan approved by the Medical Board of California. Any and all requests for a
2 payment plan shall be submitted in writing by Respondent to the Board. Failure to comply with
3 the payment plan shall be considered a violation of probation.

4 The filing of bankruptcy by Respondent shall not relieve Respondent of the responsibility
5 to repay investigation and enforcement costs.

6 13. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations
7 under penalty of perjury on forms provided by the Board, stating whether there has been
8 compliance with all the conditions of probation.

9 Respondent shall submit quarterly declarations not later than 10 calendar days after the end
10 of the preceding quarter.

11 14. GENERAL PROBATION REQUIREMENTS.

12 Compliance with Probation Unit

13 Respondent shall comply with the Board's probation unit.

14 Address Changes

15 Respondent shall, at all times, keep the Board informed of Respondent's business and
16 residence addresses, email address (if available), and telephone number. Changes of such
17 addresses shall be immediately communicated in writing to the Board or its designee. Under no
18 circumstances shall a post office box serve as an address of record, except as allowed by Business
19 and Professions Code section 2021, subdivision (b).

20 Place of Practice

21 Respondent shall not engage in the practice of medicine in Respondent's or patient's place
22 of residence, unless the patient resides in a skilled nursing facility or other similar licensed
23 facility.

24 License Renewal

25 Respondent shall maintain a current and renewed California physician's and surgeon's
26 license.

27 Travel or Residence Outside California

28 Respondent shall immediately inform the Board or its designee, in writing, of travel to any

1 areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty
2 (30) calendar days.

3 In the event Respondent should leave the State of California to reside or to practice
4 Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of
5 departure and return.

6 15. INTERVIEW WITH THE BOARD OR ITS DESIGNEE. Respondent shall be
7 available in person upon request for interviews either at Respondent's place of business or at the
8 probation unit office, with or without prior notice throughout the term of probation.

9 16. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or
10 its designee in writing within 15 calendar days of any periods of non-practice lasting more than
11 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is
12 defined as any period of time Respondent is not practicing medicine as defined in Business and
13 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct
14 patient care, clinical activity or teaching, or other activity as approved by the Board. If
15 Respondent resides in California and is considered to be in non-practice, Respondent shall
16 comply with all terms and conditions of probation. All time spent in an intensive training
17 program which has been approved by the Board or its designee shall not be considered non-
18 practice and does not relieve Respondent from complying with all the terms and conditions of
19 probation. Practicing medicine in another state of the United States or Federal jurisdiction while
20 on probation with the medical licensing authority of that state or jurisdiction shall not be
21 considered non-practice. A Board-ordered suspension of practice shall not be considered as a
22 period of non-practice.

23 In the event Respondent's period of non-practice while on probation exceeds 18 calendar
24 months, Respondent shall successfully complete the Federation of State Medical Boards's Special
25 Purpose Examination, or, at the Board's discretion, a clinical competence assessment program
26 that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model
27 Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

28 Respondent's period of non-practice while on probation shall not exceed two (2) years.

1 Periods of non-practice will not apply to the reduction of the probationary term.

2 Periods of non-practice for a Respondent residing outside of California will relieve
3 Respondent of the responsibility to comply with the probationary terms and conditions with the
4 exception of this condition and the following terms and conditions of probation: Obey All Laws;
5 General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or
6 Controlled Substances; and Biological Fluid Testing.

7 17. COMPLETION OF PROBATION. Respondent shall comply with all financial
8 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the
9 completion of probation. This term does not include cost recovery, which is due within 30
10 calendar days of the effective date of the Order, or by a payment plan approved by the Medical
11 Board and timely satisfied. Upon successful completion of probation, Respondent's certificate
12 shall be fully restored.

13 18. VIOLATION OF PROBATION. Failure to fully comply with any term or condition
14 of probation is a violation of probation. If Respondent violates probation in any respect, the
15 Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and
16 carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke
17 Probation, or an Interim Suspension Order is filed against Respondent during probation, the
18 Board shall have continuing jurisdiction until the matter is final, and the period of probation shall
19 be extended until the matter is final.

20 19. LICENSE SURRENDER. Following the effective date of this Decision, if
21 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
22 the terms and conditions of probation, Respondent may request to surrender his or her license.
23 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in
24 determining whether or not to grant the request, or to take any other action deemed appropriate
25 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent
26 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its
27 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject
28 to the terms and conditions of probation. If Respondent re-applies for a medical license, the

1 application shall be treated as a petition for reinstatement of a revoked certificate.

2 20. PROBATION MONITORING COSTS. Respondent shall pay the costs associated
3 with probation monitoring each and every year of probation, as designated by the Board, which
4 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of
5 California and delivered to the Board or its designee no later than January 31 of each calendar
6 year.

7 21. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply for
8 a new license or certification, or petition for reinstatement of a license, by any other health care
9 licensing action agency in the State of California, all of the charges and allegations contained in
10 First Amended Accusation No. 800-2019-055817 shall be deemed to be true, correct, and
11 admitted by Respondent for the purpose of any Statement of Issues or any other proceeding
12 seeking to deny or restrict license.

13 ACCEPTANCE

14 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
15 discussed it with my attorney, Gary Wittenberg, Esq. I understand the stipulation and the effect it
16 will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and
17 Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the
18 Decision and Order of the Medical Board of California.

19
20 DATED: _____

ARMAN OSSIA, M.D.
Respondent

22
23 I have read and fully discussed with Respondent Arman Ossia, M.D. the terms and
24 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.
25 I approve its form and content.

26 DATED: 1/5/23


GARY WITTENBERG, ESQ.
Attorney for Respondent

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5 California and delivered to the Board or its designee no later than January 31 of each calendar
6 year.

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17 Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the
18 Decision and Order of the Medical Board of California.

19
20 DATED: 1/5/2023

Arman Ossia, M.D.
21 ARMAN OSSIA, M.D.
22 Respondent

23 I have read and fully discussed with Respondent Arman Ossia, M.D. the terms and
24 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.
25 I approve its form and content.

26 DATED: _____

27 GARY WITTENBERG, ESQ.
28 Attorney for Respondent

ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California.

DATED: January 6, 2023

Respectfully submitted,

ROB BONTA
Attorney General of California
JUDITH T. ALVARADO
Supervising Deputy Attorney General



LATRICE R. HEMPHILL
Deputy Attorney General
Attorneys for Complainant

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Exhibit A

First Amended Accusation No. 800-2019-055817

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Attorney General of California
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11 **STATE OF CALIFORNIA**

12 In the Matter of the First Amended Accusation
Against:

Case No. 800-2019-055817

[Consolidated Case No. 800-2021-079489]

13 **ARMAN OSSIA, M.D.**
14 **421 East Angeleno Avenue, #102**
Burbank CA 91501

FIRST AMENDED ACCUSATION

15 **Physician's and Surgeon's Certificate**
16 **No. A 104763,**

17 **Respondent.**
18

19
20 **PARTIES**

21 1. William Prasifka (Complainant) brings this First Amended Accusation solely in his
22 official capacity as the Executive Director of the Medical Board of California, Department of
23 Consumer Affairs (Board).

24 2. On or about July 2, 2008, the Medical Board issued Physician's and Surgeon's
25 Certificate Number A 104763 to Arman Ossia, M.D. (Respondent). The Physician's and
26 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought
27 herein and will expire on April 30, 2024, unless renewed.

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JURISDICTION

3. This First Amended Accusation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code (Code) unless otherwise indicated.

4. Section 2220 of the Code states:

Except as otherwise provided by law, the board may take action against all persons guilty of violating this chapter. The board shall enforce and administer this article as to physician and surgeon certificate holders, including those who hold certificates that do not permit them to practice medicine, such as, but not limited to, retired, inactive, or disabled status certificate holders, and the board shall have all the powers granted in this chapter for these purposes including, but not limited to:

(a) Investigating complaints from the public, from other licensees, from health care facilities, or from the board that a physician and surgeon may be guilty of unprofessional conduct. The board shall investigate the circumstances underlying a report received pursuant to Section 805 or 805.01 within 30 days to determine if an interim suspension order or temporary restraining order should be issued. The board shall otherwise provide timely disposition of the reports received pursuant to Section 805 and Section 805.01.

(b) Investigating the circumstances of practice of any physician and surgeon where there have been any judgments, settlements, or arbitration awards requiring the physician and surgeon or his or her professional liability insurer to pay an amount in damages in excess of a cumulative total of thirty thousand dollars (\$30,000) with respect to any claim that injury or damage was proximately caused by the physician's and surgeon's error, negligence, or omission.

(c) Investigating the nature and causes of injuries from cases which shall be reported of a high number of judgments, settlements, or arbitration awards against a physician and surgeon.

5. Section 2227 of the Code states:

(a) A licensee whose matter has been heard by an administrative law judge of the Medical Quality Hearing Panel as designated in Section 11371 of the Government Code, or whose default has been entered, and who is found guilty, or who has entered into a stipulation for disciplinary action with the board, may, in accordance with the provisions of this chapter:

(1) Have his or her license revoked upon order of the board.

(2) Have his or her right to practice suspended for a period not to exceed one year upon order of the board.

(3) Be placed on probation and be required to pay the costs of probation monitoring upon order of the board.

(4) Be publicly reprimanded by the board. The public reprimand may include a requirement that the licensee complete relevant educational courses approved by the board.

1 (5) Have any other action taken in relation to discipline as part of an order of
2 probation, as the board or an administrative law judge may deem proper.

3 (b) Any matter heard pursuant to subdivision (a), except for warning letters,
4 medical review or advisory conferences, professional competency examinations,
5 continuing education activities, and cost reimbursement associated therewith that are
6 agreed to with the board and successfully completed by the licensee, or other matters
7 made confidential or privileged by existing law, is deemed public, and shall be made
8 available to the public by the board pursuant to Section 803.1.

9 6. Section 2228.1 of the Code states.

10 (a) On and after July 1, 2019, except as otherwise provided in subdivision (c),
11 the board and the Podiatric Medical Board of California shall require a licensee to
12 provide a separate disclosure that includes the licensee's probation status, the length
13 of the probation, the probation end date, all practice restrictions placed on the licensee
14 by the board, the board's telephone number, and an explanation of how the patient
15 can find further information on the licensee's probation on the licensee's profile page
16 on the board's online license information internet web site, to a patient or the
17 patient's guardian or health care surrogate before the patient's first visit following the
18 probationary order while the licensee is on probation pursuant to a probationary order
19 made on and after July 1, 2019, in any of the following circumstances:

20 (1) A final adjudication by the board following an administrative hearing or
21 admitted findings or prima facie showing in a stipulated settlement establishing any
22 of the following:

23 (A) The commission of any act of sexual abuse, misconduct, or relations with a
24 patient or client as defined in Section 726 or 729.

25 (B) Drug or alcohol abuse directly resulting in harm to patients or the extent
26 that such use impairs the ability of the licensee to practice safely.

27 (C) Criminal conviction directly involving harm to patient health.

28 (D) Inappropriate prescribing resulting in harm to patients and a probationary
period of five years or more.

(2) An accusation or statement of issues alleged that the licensee committed any
of the acts described in subparagraphs (A) to (D), inclusive, of paragraph (1), and a
stipulated settlement based upon a nolo contendere or other similar compromise that
does not include any prima facie showing or admission of guilt or fact but does
include an express acknowledgment that the disclosure requirements of this section
would serve to protect the public interest.

(b) A licensee required to provide a disclosure pursuant to subdivision (a) shall
obtain from the patient, or the patient's guardian or health care surrogate, a separate,
signed copy of that disclosure.

(c) A licensee shall not be required to provide a disclosure pursuant to
subdivision (a) if any of the following applies:

(1) The patient is unconscious or otherwise unable to comprehend the
disclosure and sign the copy of the disclosure pursuant to subdivision (b) and a
guardian or health care surrogate is unavailable to comprehend the disclosure and

1 sign the copy.

2 (2) The visit occurs in an emergency room or an urgent care facility or the visit
3 is unscheduled, including consultations in inpatient facilities.

4 (3) The licensee who will be treating the patient during the visit is not known to
5 the patient until immediately prior to the start of the visit.

6 (4) The licensee does not have a direct treatment relationship with the patient.

7 (d) On and after July 1, 2019, the board shall provide the following
8 information, with respect to licensees on probation and licensees practicing under
9 probationary licenses, in plain view on the licensee's profile page on the board's
10 online license information internet web site.

11 (1) For probation imposed pursuant to a stipulated settlement, the causes
12 alleged in the operative accusation along with a designation identifying those causes
13 by which the licensee has expressly admitted guilt and a statement that acceptance of
14 the settlement is not an admission of guilt.

15 (2) For probation imposed by an adjudicated decision of the board, the causes
16 for probation stated in the final probationary order.

17 (3) For a licensee granted a probationary license, the causes by which the
18 probationary license was imposed.

19 (4) The length of the probation and end date.

20 (5) All practice restrictions placed on the license by the board.

21 (e) Section 2314 shall not apply to this section.

22 7. Section 2234 of the Code, states:

23 The board shall take action against any licensee who is charged with
24 unprofessional conduct. In addition to other provisions of this article, unprofessional
25 conduct includes, but is not limited to, the following:

26 (a) Violating or attempting to violate, directly or indirectly, assisting in or
27 abetting the violation of, or conspiring to violate any provision of this chapter.

28 (b) Gross negligence.

(c) Repeated negligent acts. To be repeated, there must be two or more
negligent acts or omissions. An initial negligent act or omission followed by a
separate and distinct departure from the applicable standard of care shall constitute
repeated negligent acts.

(1) An initial negligent diagnosis followed by an act or omission medically
appropriate for that negligent diagnosis of the patient shall constitute a single
negligent act.

(2) When the standard of care requires a change in the diagnosis, act, or
omission that constitutes the negligent act described in paragraph (1), including, but
not limited to, a reevaluation of the diagnosis or a change in treatment, and the

licensee's conduct departs from the applicable standard of care, each departure constitutes a separate and distinct breach of the standard of care.

(d) Incompetence.

(e) The commission of any act involving dishonesty or corruption that is substantially related to the qualifications, functions, or duties of a physician and surgeon.

(f) Any action or conduct that would have warranted the denial of a certificate.

(g) The failure by a certificate holder, in the absence of good cause, to attend and participate in an interview by the board. This subdivision shall only apply to a certificate holder who is the subject of an investigation by the board.

8. Section 2266 of the Code states: The failure of a physician and surgeon to maintain adequate and accurate records relating to the provision of services to their patients constitutes unprofessional conduct.

9. Section 2239 of the Code states:

(a) The use or prescribing for or administering to himself or herself, of any controlled substance; or the use of any of the dangerous drugs specified in Section 4022, or of alcoholic beverages, to the extent, or in such a manner as to be dangerous or injurious to the licensee, or to any other person or to the public, or to the extent that such use impairs the ability of the licensee to practice medicine safely or more than one misdemeanor or any felony involving the use, consumption, or self-administration of any of the substances referred to in this section, or any combination thereof, constitutes unprofessional conduct. The record of the conviction is conclusive evidence of such unprofessional conduct.

(b) A plea or verdict of guilty or a conviction following a plea of nolo contendere is deemed to be a conviction within the meaning of this section. The Medical Board may order discipline of the licensee in accordance with Section 2227 or the Medical Board may order the denial of the license when the time for appeal has elapsed or the judgment of conviction has been affirmed on appeal or when an order granting probation is made suspending imposition of sentence, irrespective of a subsequent order under the provisions of Section 1203.4 of the Penal Code allowing such person to withdraw his or her plea of guilty and to enter a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation, complaint, information, or indictment.

10. Section 820 of the Code states:

Whenever it appears that any person holding a license, certificate or permit under this division or under any initiative act referred to in this division may be unable to practice his or her profession safely because the licensee's ability to practice is impaired due to mental illness, or physical illness affecting competency, the licensing agency may order the licensee to be examined by one or more physicians and surgeons or psychologists designated by the agency. The report of the examiners shall be made available to the licensee and may be received as direct evidence in proceedings conducted pursuant to Section 822.

11. Section 822 of the Code states:

If a licensing agency determines that its licentiate's ability to practice his or her profession safely is impaired because the licentiate is mentally ill, or physically ill affecting competency, the licensing agency may take action by any one of the following methods:

- (a) Revoking the licentiate's certificate or license.
- (b) Suspending the licentiate's right to practice.
- (c) Placing the licentiate on probation.
- (d) Taking such other action in relation to the licentiate as the licensing agency in its discretion deems proper.

The licensing section shall not reinstate a revoked or suspended certificate or license until it has received competent evidence of the absence or control of the condition which caused its action and until it is satisfied that with due regard for the public health and safety the person's right to practice his or her profession may be safely reinstated.

COST RECOVERY

12. Section 125.3 of the Code states:

(a) Except as otherwise provided by law, in any order issued in resolution of a disciplinary proceeding before any board within the department or before the Osteopathic Medical Board, upon request of the entity bringing the proceeding, the administrative law judge may direct a licensee found to have committed a violation or violations of the licensing act to pay a sum not to exceed the reasonable costs of the investigation and enforcement of the case.

(b) In the case of a disciplined licensee that is a corporation or a partnership, the order may be made against the licensed corporate entity or licensed partnership.

(c) A certified copy of the actual costs, or a good faith estimate of costs where actual costs are not available, signed by the entity bringing the proceeding or its designated representative shall be prima facie evidence of reasonable costs of investigation and prosecution of the case. The costs shall include the amount of investigative and enforcement costs up to the date of the hearing, including, but not limited to, charges imposed by the Attorney General.

(d) The administrative law judge shall make a proposed finding of the amount of reasonable costs of investigation and prosecution of the case when requested pursuant to subdivision (a). The finding of the administrative law judge with regard to costs shall not be reviewable by the board to increase the cost award. The board may reduce or eliminate the cost award, or remand to the administrative law judge if the proposed decision fails to make a finding on costs requested pursuant to subdivision (a).

(e) If an order for recovery of costs is made and timely payment is not made as directed in the board's decision, the board may enforce the order for repayment in any appropriate court. This right of enforcement shall be in addition to any other rights the board may have as to any licensee to pay costs.

1 (f) In any action for recovery of costs, proof of the board's decision shall be
2 conclusive proof of the validity of the order of payment and the terms for payment.

3 (g) (1) Except as provided in paragraph (2), the board shall not renew or
4 reinstate the license of any licensee who has failed to pay all of the costs ordered
5 under this section.

6 (2) Notwithstanding paragraph (1), the board may, in its discretion,
7 conditionally renew or reinstate for a maximum of one year the license of any
8 licensee who demonstrates financial hardship and who enters into a formal agreement
9 with the board to reimburse the board within that one-year period for the unpaid
10 costs.

11 (h) All costs recovered under this section shall be considered a reimbursement
12 for costs incurred and shall be deposited in the fund of the board recovering the costs
13 to be available upon appropriation by the Legislature.

14 (i) Nothing in this section shall preclude a board from including the recovery of
15 the costs of investigation and enforcement of a case in any stipulated settlement.

16 (j) This section does not apply to any board if a specific statutory provision in
17 that board's licensing act provides for recovery of costs in an administrative
18 disciplinary proceeding.

19 FACTUAL ALLEGATIONS

20 13. On or about July 1, 2021, Burbank Police Department officers responded to a report
21 of a possible drunk driver. Officers conducted a traffic stop and made contact with Respondent's
22 vehicle. Upon making contact with Respondent, officers noticed two unopened bottles of beer in
23 his vehicle. Officers also observed an open bottle of beer on the floor of the driver's side.

24 14. Officers began to interview Respondent and, while doing so, detected a strong odor of
25 alcohol emitting from his breath and person. Officers also observed that Respondent's eyes were
26 glassy and watery. Officers explained and demonstrated the Standardized Field Sobriety Tests
27 (SFSTs) to Respondent and he stated that he understood the instructions. Respondent did not
28 perform the SFSTs as instructed and officers determined he was under the influence of alcohol.

15. Respondent was placed under arrest and initially declined to voluntarily submit to a
preliminary breath test. Respondent was transported to the Burbank Police Department station,
where he submitted to a breath test. The tests showed that Respondent had a blood alcohol
content (BAC) of .16% and .16%.

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1 16. On or about October 5, 2021, in the case of *The People of the State of California vs.*
2 *Arman Ossia*, Superior Court of California for the County of Los Angeles, case number
3 1BK01707, Respondent was charged with driving under the influence of an alcoholic beverage, in
4 violation of Vehicle Code section 23152, subdivision (a), a misdemeanor. Respondent was also
5 charged with driving under the influence while having .08 percent or more blood alcohol content,
6 in violation of Vehicle Code section 23152, subdivision (b), a misdemeanor. Each count included
7 a special allegation that Respondent was driving at a time when he had .15 percent or more blood
8 alcohol content.

9 17. As of June 2022, the criminal charges against Respondent were still pending.

10 **FIRST CAUSE FOR DISCIPLINE**

11 **(Use of Drugs and/or Alcohol in a Dangerous Manner)**

12 18. Respondent is subject to disciplinary action under section 2239 of the Code insofar as
13 Respondent used alcoholic beverages to the extent, or in such a manner, as to be dangerous or
14 injurious to himself and to the public, as more particularly alleged in paragraphs 13 through 17,
15 above, which are incorporated herein by reference as if fully set forth.

16 **SECOND CAUSE FOR DISCIPLINE**

17 **(Repeated Negligent Acts)**

18 19. Respondent is subject to disciplinary action under Code section 2234, subdivision (c),
19 in that Respondent committed repeated negligent acts in connection with his provision of medical
20 services to three patients. The circumstances are as follows:

21 **Patient 1:**¹

22 20. On or about January 4, 2016, Respondent saw Patient 1, an 88-year-old male, for a
23 sore throat and runny nose. Respondent continued to regularly treat Patient 1 through on or about
24 November 6, 2018. During that time period, Respondent regularly prescribed (on an approximate
25 monthly basis) promethazine with codeine² to Patient 1. The patient had also been prescribed

26 ¹ The patients herein are referred to by numbers to address privacy concerns.

27 ² "Promethazine with codeine" or codeine phosphate/promethazine hydrochloride is an
28 antihistamine and opioid antitussive combination drug. The combination of an opiate agonist with
antitussive activity (codeine) and a phenothiazine-structure antihistamine (promethazine) when used

1 other drugs from other providers, including: (a) temazepam³, filled on or about each of the
2 following dates, February 11, 2016, March 9, 2016, April 11, 2016, May 9, 2016, March 5, 2017
3 and July 21, 2017; (b) hydrocodone⁴ with acetaminophen⁵, filled on or about each of the
4 following dates: February 11, 2016, April 11, 2016, May 9, 2016, June 15, 2016, July 25, 2016,
5 September 16, 2016, October 24, 2016, December 14, 2016 and January 13, 2017; and (c)
6 tramadol⁶, filled on or about each of the following dates: September 20, 2016 and March 5, 2017.

7 21. On or about January 4, 2016 and thereafter, Respondent committed the following
8 acts and/or omissions, each of which individually, collectively, or in any combination thereof,
9 constitutes negligence: (a) Respondent failed to adequately perform evaluations and assess the
10 patient, discuss the potential benefits and risks of long-term medication treatment (including the
11 dangers of concurrent use of sedatives, opioids, and other medications), obtain the patient's
12 consent, consider the patient's possible aberrant or drug seeking behavior, perform drug testing,
13 review the prescribing records of the patient, consult with specialists, develop a treatment plan
14 and objectives, consider treatment agreements from the patient, and/or (b) Respondent failed to

15 _____
16 together can be prescribed to relieve cough and upper respiratory symptoms due to conditions such as the
17 common cold. Promethazine is sold in its various forms under the brand names Phenadoz®,
18 Promethegan®, and Phenergan®. It is a dangerous drug as defined in Code section 4022.

19 ³ "Temazepam" is a benzodiazepine medication. It is generally indicated for the short-term
20 treatment of insomnia. It is sold under the brand name Restoril®. It is a Schedule IV controlled substance
21 pursuant to Health and Safety Code section 11057, subdivision (d)(29), and a dangerous drug as defined in
22 Code section 4022.

23 ⁴ "Hydrocodone" is a semisynthetic opioid analgesic similar to but more potent than codeine. It is
24 used as the bitartrate salt or polistirex complex, and as an oral analgesic and antitussive. It is marketed, in
25 its varying forms, under a number of brand names, including Vicodin®, Hycodan® (or generically
26 Hydromet®), Lorcet®, Lortab®, Norco®, and Hydrokon®, among others). Hydrocodone also has a high
27 potential for abuse. Hydrocodone is a Schedule II controlled substance pursuant to Health and Safety
28 Code section 11055, subdivision (b)(1)(I), and a dangerous drug pursuant to Code section 4022.

⁵ "Acetaminophen" is a widely used over-the-counter analgesic (pain reliever) and antipyretic
(fever reducer). It is also known as paracetamol, or APAP. It is typically used for mild to moderate pain
relief, such as relief of headaches. It is a major ingredient in numerous cold and flu remedies. In
combination with opioid analgesics, paracetamol can also be used in the management of more severe pain
such as post surgical pain and providing palliative care in advanced cancer patients. Acute overdoses of
paracetamol can cause potentially fatal liver damage and, in rare individuals, a normal dose can do the
same; the risk is heightened by alcohol consumption. It is sold in varying forms, including under the
brand name Tylenol®.

⁶ "Tramadol" is a synthetic pain medication used to treat moderate to moderately severe pain. The
extended-release or long-acting tablets are used for chronic ongoing pain. Tramadol is sold under various
brand names, including Ultram® and ConZip®. It is a Schedule IV controlled substance pursuant to the
federal Controlled Substances Act, and a dangerous drug pursuant to Code section 4022.

adequately and accurately document any of the foregoing.

FACTUAL ALLEGATIONS REGARDING PATIENTS 2 AND 3

22. During the Board's investigation of Respondent, the Board requested the medical records of Patients 2 and 3 from Respondent. On or about March 14, 2022, Respondent provided certifications of no records for Patients 2 and 3 to the Board's investigator in response to the request for their medical records. During his subject interview with the Board's investigator, Respondent stated that he believed that his medical records for Patients 2 and 3 were lost.

23. CURES⁷ data showed that Patient 2, a 95-year-old female, beginning on or about February 22, 2016, filled prescriptions for promethazine with codeine and continued to fill prescriptions from Respondent for that medication on an approximate monthly basis through August 23, 2018.

24. CURES data showed that Patient 3, a 94-year-old female, beginning on or about February 12, 2016, filled a prescription for promethazine with codeine and continued to fill prescriptions from Respondent for that medication on an approximate monthly basis through December 22, 2017.

Patient 2:

25. On or about February 22, 2016, and thereafter, Respondent committed negligence when he failed to maintain accurate and adequate medical records of his care and treatment for Patient 2.

Patient 3:

26. On or about February 12, 2016, and thereafter, Respondent committed negligence when he failed to maintain accurate and adequate medical records of his care and treatment for Patient 3.

⁷ "CURES" means the Department of Justice, Bureau of Narcotics Enforcement's California Utilization, Review and Evaluation System (CURES) for the electronic monitoring of the prescribing and dispensing of Schedule II, III, IV and V controlled substances dispensed to patients in California pursuant to Health and Safety Code section 11165. The CURES database captures data from controlled substance prescriptions filled as submitted by pharmacies, hospitals, and dispensing physicians. Law enforcement and regulatory agencies use the data to assist in their efforts to control the diversion and resultant abuse of controlled substances. Prescribers and pharmacists may request a patient's history of controlled substances dispensed in accordance with guidelines developed by the Department of Justice.

1 **THIRD CAUSE FOR DISCIPLINE**

2 **(Failure to Maintain Adequate Medical Records)**

3 27. Respondent is subject to disciplinary action under Code section 2266 in that
4 Respondent failed to maintain adequate and accurate records related to the provision of medical
5 services to Patients 1, 2 and 3. The circumstances are as follows:

6 28. The allegations of the Second Cause for Discipline are incorporated herein by
7 reference as if fully set forth.

8 **FOURTH CAUSE FOR DISCIPLINE**

9 **(Unprofessional Conduct)**

10 29. Respondent is subject to disciplinary action under section 2234 of the Code in that he
11 engaged in unprofessional conduct as more particularly alleged in the First, Second and Third
12 Causes for Discipline in paragraphs 18 through 28, above, which are incorporated by reference as
13 if fully set forth herein.

14 **FIFTH CAUSE FOR DISCIPLINE**

15 **(Inability to Practice Medicine Safely Due to Mental and/or Physical Condition)**

16 30. Respondent is subject to disciplinary action under section 822 of the Code in that
17 Respondent has a mental condition that requires monitoring and practice restrictions. The
18 circumstances are as follows:

19 31. On or about July 6, 2021, the Board received notice that Respondent was arrested by
20 the Burbank Police Department (BPD). On or about July 26, 2021, the Board received the arrest
21 report from BPD.

22 32. On or about September 16, 2021, a Board representative made an unannounced visit
23 to Respondent's office. Upon making contact, the representative observed Respondent looking
24 disheveled. Respondent explained that he fell and hit his head the night prior, and was
25 hospitalized and later released. The representative asked Respondent to submit to a urinalysis and
26 to sign voluntary agreements for mental and physical examinations. Respondent refused to
27 submit to testing and refused to sign the agreements. The agreements were left with Respondent.

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1 33. On or about September 27, 2021, during a telephonic interview with the Board,
2 Respondent agreed to sign voluntary agreements for mental and physical examinations, and
3 volunteered to provide the Board with a urine sample for biological testing.

4 34. On or about November 3, 2021, Respondent signed and submitted the voluntary
5 agreements for mental and physical examinations to determine if he could safely practice
6 medicine.

7 35. Following his mental examination, performed on January 7, 2022, Respondent was
8 found to suffer from an Unspecified Alcohol-Related Disorder and a history of Unspecified
9 Anxiety Disorder. It was found that, in order to continue to practice safely, Respondent required
10 restrictions on his medical practice.

11 36. Specifically, it was recommended that Respondent be monitored to ensure his
12 conditions do not progress or impair his professional abilities. It was also recommended that
13 Respondent completely abstain from the use of alcohol and any potentially addictive prescription
14 medications; Respondent participate in random biological fluid testing, to confirm his abstinence
15 from alcohol; Respondent attend alcoholic anonymous meetings; and Respondent resume therapy
16 to monitor for the recurrence of anxiety or other psychiatric concerns.

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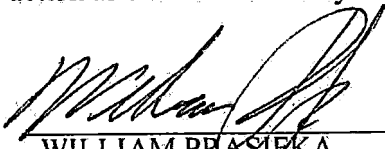
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1 **PRAYER**

2 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,
3 and that following the hearing, the Medical Board of California issue a decision:

- 4 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 104763,
5 issued to Arman Ossia, M.D.;
- 6 2. Revoking, suspending or denying approval of Arman Ossia, M.D.'s authority to
7 supervise physician assistants and advanced practice nurses;
- 8 3. Ordering Arman Ossia, M.D., to pay the Board the costs of the investigation and
9 enforcement of this case, and if placed on probation, the costs of probation monitoring;
- 10 4. Ordering Respondent Arman Ossia, M.D., if placed on probation, to provide patient
11 notification in accordance with Business and Professions Code section 2228.1; and
- 12 5. Taking such other and further action as deemed necessary and proper.

13
14 DATED: JUL 05 2022


15 WILLIAM PRASIFKA
16 Executive Director
17 Medical Board of California
18 Department of Consumer Affairs
19 State of California
20 Complainant

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22 Ossia First Amended Accusation.docx
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